PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
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PETITION FOR EXTENSION		Docket Number (Optional)						
(Fees pursuant to the Consoli	FY 2005 dated Appropriations Act, :	204552029000						
Application Number	10/611,643	Filed July 2, 2003						
For NONVOLATILE SEMICONDUCTOR MEMORY DEVICE								
Art Unit 2824		Examiner D. Nguyen						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and	fee are as follows (che	ck time period desi	red and enter the ap	propriate fee below):				
[V] 0	NED 4 47/-1/41)	<u>Fee</u>	Small Entity Fee					
One month (37 C	. , , , , ,	\$120	\$60	\$ 120.00				
Two months (37	CFR 1.17(a)(2))	\$450	\$225	\$				
Three months (3	7 CFR 1.17(a)(3))	\$1020	\$510	\$				
Four months (37	CFR 1.17(a)(4))	\$1590	\$795	\$				
Five months (37	CFR 1.17(a)(5))	\$2160	\$1080	\$				
Applicant claims small	l entity status. See 37 (	CFR 1.27.						
	t of the fee is enclosed.							
	d. Form PTO-2038 is a	ttached.						
	ndy been authorized to c		application to a Depo	osit Account.				
The Director is hereby Deposit Account Num	be required, or cred d a duplicate copy o m (PTO/SB/17) is at duplicate.							
I am the applica	ant/inventor.							
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
attorney or agent of record. Registration Number								
	ey or agent unger 37 CF							
Regi	stration number if acting	der 37 CFR 1.34	43,148	<u> </u>				
/ line	1 Call	December 27, 2004						
	Signature		Date					
	Kevin R. Spivak ed or printed name	(703) 760-7762 Telephone Number						
NOTE: Signatures of all the inventor	,							
than one signature is required, see								

12/28/2004 NNGUYEN1 00000088 031952 10611643

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120.00 DA

PTO/SB/17 (12-04)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **FEE TRANSMITTAL** 

Complete if Known					
Application Number	10/611,643				
Filing Date	July 2, 2003				
First Named Inventor	Yasuaki HIRANO				
Examiner Name	D. Nguyen				
Art Unit	2824				
Attorney Docket No.	204552029000				

For FY 2005							asuaki nikai	INO	
				Examiner Name		D	D. Nguyen		
Applicant claims small entity status. See 37 CFR 1.27						28	2824		
TOTAL AMOUNT OF PAYMENT (\$) 120.00			Attorney Docket No. 204552029000						
METHOD OF PAYMENT (	check all	that apply)							
Check Credit Card	1	Money Order	None	:	Other (	please identif	y):		
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP									
For the above-identifie	d deposit	account, the D	irector is	hereby at	uthorize	ed to: (check	all that apply)		
x Charge fee(s) inc	dicated be	low			Charge	e fee(s) indic	ated below, ex	cept for th	he filing fee
X Charge any addi			rpayment	of x	Credit	any overpay	ments		
fee(s) under 37	CFK 1.10	and 1.17					<del></del>		
1. BASIC FILING, SEARCH, A	ND EXA	MINATION FEI	ES			•			
,	FILIN	G FEES	SEA	RCH FE		EXAMINA	ATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Fee		Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)
Utility	300	150	500	25		200	100	10001	<u> </u>
Design	200	100	100	5	50	130	65		
Plant	200	100	300	15	50	160	80		
Reissue	300	150	500	25	50	600	300		
Provisional	200	100	0		0	0	0		
2. EXCESS CLAIM FEES									Small Entity
Fee Description								<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 or, for Rei								50	25
Each independent claim over : Multiple dependent claims	or, for K	teissues, each	naepenae	ent claim	more t	inan in the o	riginai patent	200	100
• •	·	F (A)	F D	- i - i - i - i - i - i - i - i - i - i		88	Ainle Denned	360	180
Total Claims		F <del>UU</del> F	Fee Paid (\$)			Multiple Dependent Claims Fee (\$) Fee Paid (\$)			
	× -				-	<u>ree</u>	7 <u>5</u> 1	ee raiu (4	2
Indep. Claims Extra Cla	ims_	Fee (\$)	Fee Pa	aid (\$)	_		<del></del>		_
-=	x				_				
3. APPLICATION SIZE FEE			_						
If the specification and draw for each additional 50 she								for small e	ntity)
	Sheets					ction thereof	Fee (\$)	Fee	Paid (\$)
- 100 =		`						<del></del>	4.4.14.1
100 = /50 (round up to a whole number) x : 4. OTHER FEE(S)							Fees	Paid (\$)	
Non-English Specification	\$130 fe	e (no small en	tity disco	unt)					
Other: 1251 Extension for response within first month							12	20.00	
SUBMITTED BY	77/	/ /							
Signature			7 1	Registration	ı No.	43,148	Telephone	(703) 76	0-7762
// / sim	// /	Lulk		(Attorney/Ag	jent)	-10, 140	1 . 5,55,.5,.5	1,00,70	

SUBMITTE	D BY	1 7		7 /				
Signature	<i>X</i> 7	sine	10-1	7.1	Registration No. (Attorney/Agent)	43,148	Telephone	(703) 760-7762
Name (Prin	утуре) Ке	evin R. Spi	vak.	Kin		·	Date	December 27, 2004